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Michigan Donartment of State Office of the Creet Seel



	Office: 517/373-2531								
FAX Request to Schedule Authentication FAX: 517/373-3706									
COUNTER SERVICE HOURS: 8:00 – 11:30 A.M. & 1:00 – 4:00 P.M.									
Requestor's name:			Day time telephone number:						
Country documents are going to:			Pickup date & time requested: (NOTE: Allow 3 business days (72hrs) for processing)						
Name of adoption agency: (if applicable)			Agency's telephone number:						
Agency's contact person:			Contact person's telephone number:						
DOCUMENTS MUST BE NOTARIZED BEFORE FAXING THIS FORM FOR AN APPOINTMENT									
	Public's Name (as ommissioned)	Expiration Date	Commissioned County		nber of uments				
Were notaries listed above also certified by a county clerk? Circle: NO or YES									
If YES, name of person that signed county certification (NOTE: if signature is unreadable, please fax a copy of it)			County		nber of cuments				
Number of documents certified by State Registrar: Carol V. Getts Number			Is the country of destination requiring the Registrar's signature notarized? Yes No (If YES, complete the notary section above)						

Note: You will be contacted at the phone number indicated for confirmation/scheduling of the appointment. Please do <u>not</u> call the office to confirm receipt of fax or appointment request.